



# Hood River County Health Department, Environmental Health Office

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## Mobile Food Unit – Plan Review Application

Last Updated 7/11/22

The purpose of this plan review process is to ensure that proposed mobile Food Establishments comply with all requirements found within the [Oregon Food Code](#)<sup>1</sup>. The Oregon Food Code uses special food-safety words and phrases. It is very important that we all share a common understanding of these special words and phrases. For this reason, and **before you complete this application**, we ask that you complete your food handlers' certificate training. We will not accept your application until you submit it with either a copy of your food handlers' certificate/card, or a copy of your test answers (*see page 4 of this application*).

Submit plans **before** you buy/build/remodel a mobile food establishment. Any changes that are required will be your financial responsibility and must be completed before you are permitted to operate. We wish to emphasize that this is a 'plan' review process, not a finished establishment review process. A plan review fee must also accompany this application before it will be reviewed.

### ORS: 624.310<sup>2</sup> Definitions...

(3) "**Commissary**" means commissary catering establishment, restaurant or any other place in which food, beverage, ingredients, containers or supplies are kept, handled, prepared or stored, and from which vending machines or mobile units are serviced...

(8) "**Mobile unit**" means any vehicle on which food is prepared, processed or converted or which is used in selling and dispensing food to the ultimate consumer...

(16) "**Warehouse**" means any place where food, utensils, single-service articles, cleaning or servicing supplies for vending machines, mobile units or commissaries are stored...

New ☐ Remodel ☐; Menu Revision ☐

Facility Name:	Business Owner <small>(Corporation, Individual, etc.):</small>
Contact Person:	Owner Contact <small>(if different):</small>
Contact Person's Mailing Address:	
Daytime Phone:	Alternate Phone:
E-Mail Address(s):	
Is this a new Mobile Unit? Yes <input type="checkbox"/> , No <input type="checkbox"/> .	
<i>If 'yes', who is building it? Professional Mobile Cart/Truck/Trailer Builder <input type="checkbox"/>, I am doing it myself <input type="checkbox"/>. Is it already built? Yes <input type="checkbox"/>, No <input type="checkbox"/>.</i>	
Did you acquire an existing/used Mobile Unit? Yes <input type="checkbox"/> , No <input type="checkbox"/> .	
<i>If 'yes', do you have a copy of the previous license and approval documents? Yes <input type="checkbox"/>, No <input type="checkbox"/>. Are they attached? Yes <input type="checkbox"/>, No <input type="checkbox"/>.</i>	
Currently Licensed? Yes <input type="checkbox"/> , No <input type="checkbox"/>	Facility Name:
<i>If previously licensed, what jurisdiction was it issued:</i> <span style="float: right;"><i>When:</i></span>	
How do you intend to license this Mobile Unit? Class: I <input type="checkbox"/> , II <input type="checkbox"/> , III <input type="checkbox"/> , IV <input type="checkbox"/>	
<small>(OAR: 333-162-0020(2))</small>	
Do you intend to operate with or without a base of operations? With <input type="checkbox"/> , Without <input type="checkbox"/>	
<small>(OAR: 333-162-0040)</small>	

<sup>1</sup> Oregon Food Code: (OAR: 333-150)

<https://www.oregon.gov/oha/PH/HEALTHYENVIRONMENTS/FOODSAFETY/Documents/foodsafetyrulesweb.pdf>

<sup>2</sup> ORS: 624 may be viewed online at: [https://www.oregonlegislature.gov/bills\\_laws/ors/ors624.html](https://www.oregonlegislature.gov/bills_laws/ors/ors624.html)

## Guidance for a Successful Application

When submitting this application, include the following documents:

- ☐ **Food Handlers' Certification** (*card or test*)
- ☐ **Proposed menu(s)**, including seasonal and special menus
- ☐ **Site plan** – If operating at a permanent site, show the location of unit on site, including alleys, streets, and outside equipment (*dumpsters, well, septic system and toilet facilities*).
- ☐ **Floor Plans** – Show all proposed facilities (*mobile unit, commissary kitchen, and/or warehouse*). Drawn to scale showing location of equipment, plumbing, mechanical ventilation, etc.
- ☐ **List of equipment**
- ☐ **Indicate** whether you will utilize a commissary and/or warehouse. *Attach operational plans for each facility* (templates are available on our website ([www.hoodrivercounty.gov/eh](http://www.hoodrivercounty.gov/eh))).

### Submitting incomplete plans will delay your plan review!

Please answer every question and submit all required items (*see list above*).

*You are also required to comply with all applicable local, state, and federal regulations. This may include acquiring a variety of additional permits/approvals such as: wastewater disposal, zoning, landowner's permission, business permit, etc. It is the responsibility of the food establishment operator to ensure compliance with all laws. Failure to comply may result in additional expenses and/or a denial/revocation of your license to operate.*

**Required Oregon [Food Handlers' Certification](#), Creating a common food-safety language:**

The Oregon Food Code uses very particular jargon words. Before drafting your plans, or completing this packet, study the manual and pass your Oregon Food Handlers' Certification test. Otherwise, the questions in the packet may not be fully understood. Turn in a copy of your Food Handlers' Certification with your plans. Access to the test online is available on our website at the following link: <https://www.hoodrivercounty.gov/fh>.

You may also take the test in our office, in person. The Study Guide, and test, are available in several languages upon request. Providing access in less common languages and/or media (*like Braille*) takes additional time (*please call ahead if you need any accommodations*). For low literacy clients, we can give the test orally.

Operating a restaurant requires more training and experience than just knowing how to pass the Oregon Food Handlers' Certification (*see [Chapter 2](#) of the Oregon Food Code*). This is meant to only be a first step in the plan review and consultation process provided by our office to ensure that your business is successful (*and safely*).

### Proposed Menu & Food Processes:

We are interested in the types of food processes you will be using in your Food Establishment. We are less interested in what your menu items are called or how much they cost. Examples of food processes are 'cooking raw animal products', 'cooling soup', 'cutting lettuce', 'pickling cucumbers', 'boiling potatoes', 'cleaning fresh produce', etc.

If available, please include all seasonal, web-based, and special menus as well.

**Scale Site Plan Must Include:** Consider using the Hood River County, Online Parcel Viewer available at: <http://hrccd.co.hood-river.or.us/county-webmap/>

1. Draw the site plan to scale
2. The location of the facility and surrounding structures
3. The general area, including nearby streets and toilet facilities.
4. Garbage and refuse storage areas (disclose ground surfacing under garbage).
5. If applicable, the water source (well, spring, etc.) and the wastewater system (septic tank & drain field).

## Scale Floor Plan Drawings Must Include:

1. Draw plans to scale (recommend ¼ inch = 1 foot);
2. Distinguish between food preparation areas;
3. Label all equipment including,
  - a. sink fixtures by designed use,
  - b. floor sinks,
  - c. Indicate which plumbing fixtures have in-direct drains or not;
4. Entrances, Exits, Doors and Windows; and
5. Areas where raw animal products will be handled (if applicable).

## List of Equipment:

The list of equipment helps us determine what types of food processes you will be doing. It also helps us evaluate whether the volume of food you anticipate serving can be supported by the types of equipment you intend to use. As well, depending on the types of equipment and food processes you use, you may also need to have mechanical ventilation installed in your facility.

## Some Extra Information for a successful business operation:

Remember: Licenses expire on 12/31 of each calendar year. Renewals for the following calendar year are due by 12/31. Failure to renew the license on time will result in a late penalty of \$100.00 on the first day of the new year. Another penalty will be applied each calendar month that the license fee is late. There is no exception for seasonal facilities. Fees are subject to change.

We send license renewals to the address we have on file. If you move, let us know so that you receive your license renewal. If you are going to be away from home during the renewal period, consider pre-paying in advance. Call us if you anticipate having trouble paying on-time so that we can discuss your options.

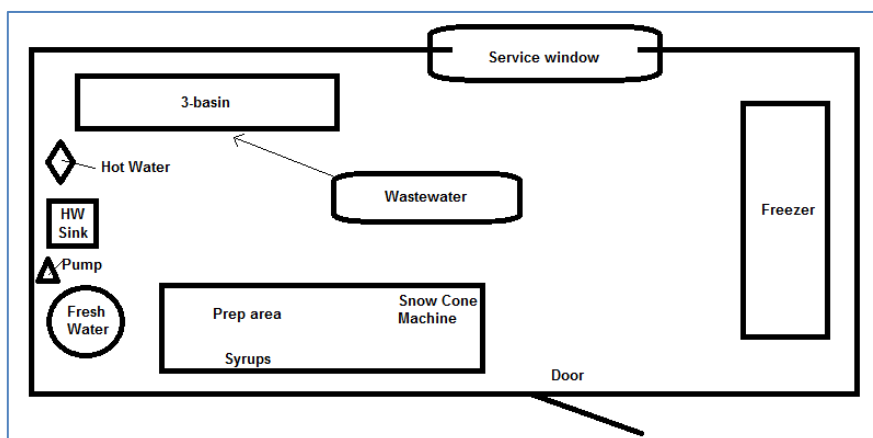
If you expect funds to be limited in November & December, consider pre-paying for your license in advance. Contact our office to make any alternative arrangements.

*The Oregon Food Code (OAR: 333-150-0000) may be viewed at:*

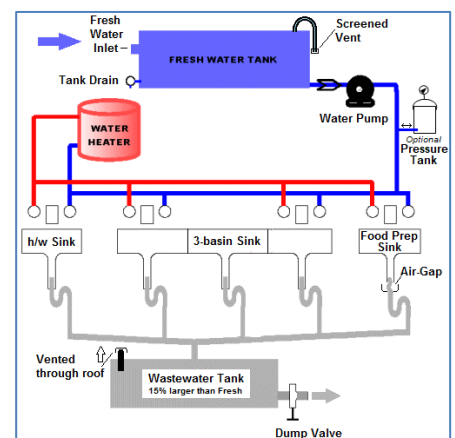
<https://www.oregon.gov/oha/PH/HEALTHYENVIRONMENTS/FOODSAFETY/Documents/foodsafetyrulesweb.pdf>

*For additional assistance, please contact our office:*

541-387-6885; <https://www.hoodrivercounty.gov/eh>



Example Floor Plan Drawing & Plumbing Schematic



## Food Handlers' Certification: **Required prior to submitting plans for review**

Submit a copy of your certificate (if you have one), or complete the test below and submit it with your application)

We will **not** review your plans until this step is 100% complete.

**Instructions:** Take the test by answering the following 20 questions. Pick the best correct answer. Study for, and complete the test, **before** completing the rest of this packet (*we are available to help upon request*). The purpose of this pre-plan-review-test is to ensure that we share a common food-safety language.

The [Food Handlers' Study Manual](https://www.hoodrivercounty.gov/fh), is available at: <https://www.hoodrivercounty.gov/fh>. If you are unsure what an answer is, we are also available to help you (541-387-6885). **Hint:** *eliminate the wrong answers first.*

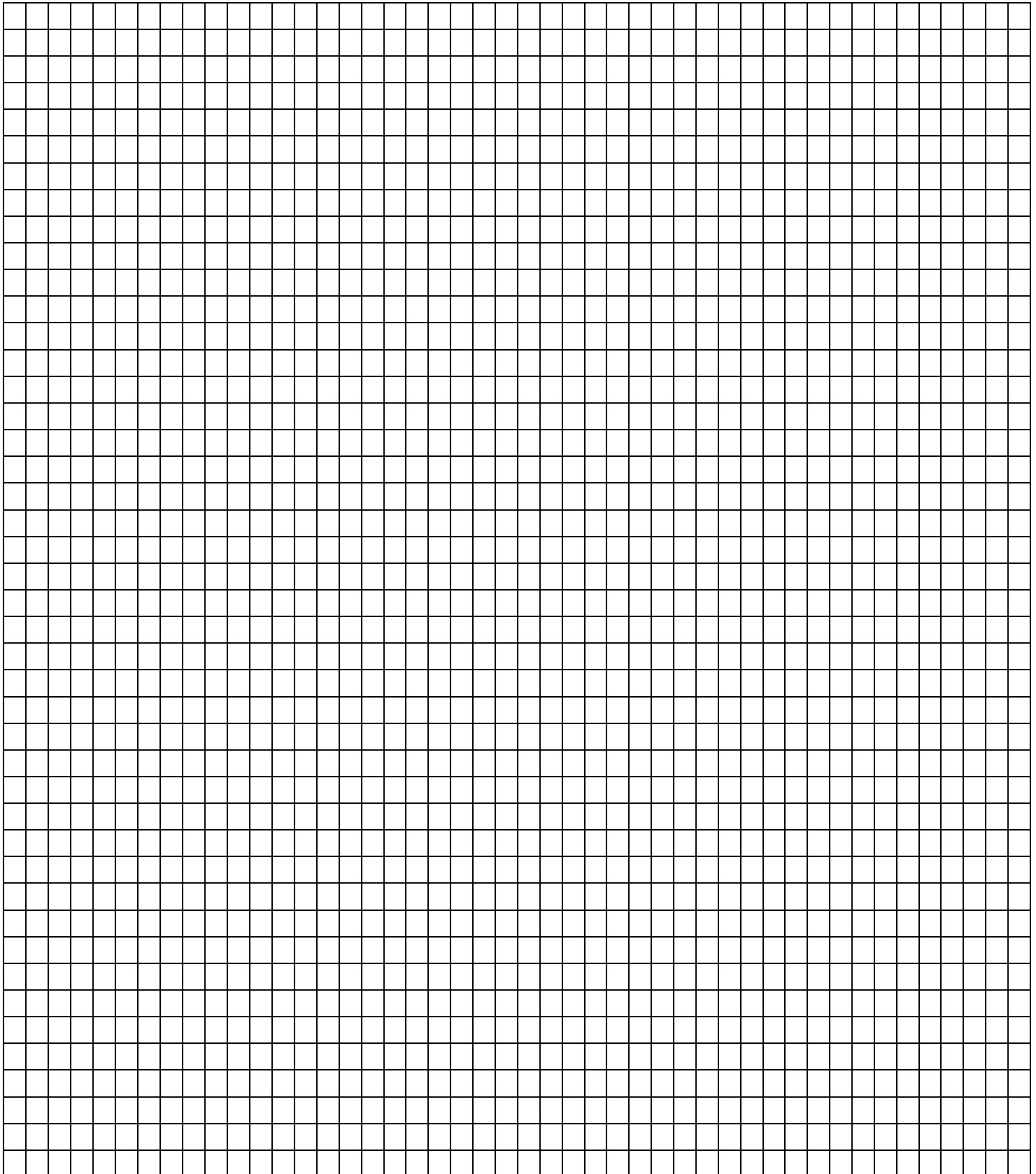
1. What causes foodborne illnesses?
  - A. ☐ People eating food that is contaminated by germs, chemicals and/or toxins.
  - B. ☐ People making mistakes while taking orders.
  - C. ☐ People who overcook food.
  - D. ☐ People who breathe polluted air.
2. When food is contaminated with germs:
  - A. ☐ It smells like compost and separates.
  - B. ☐ It has a musty smell and a dull color.
  - C. ☐ It often looks and smells like any other food.
  - D. ☐ It smells like yeast.
3. A person who works at a restaurant as a server feels sick. They had diarrhea and nausea all night. They feel a little better now and are due to start their work shift at 10 am. What should they do?
  - A. ☐ They should be very careful and wash their hands often while they are at work.
  - B. ☐ They should call their supervisor and say they feel sick with diarrhea and nausea.
  - C. ☐ They should take antacid medicine and go to work.
  - D. ☐ Both 'A' & 'C' are correct.
4. When a person gets a foodborne illness, it is usually caused by:
  - A. ☐ Food they ate within the last 24 hours.
  - B. ☐ Food they ate anytime within the last few minutes to several days.
  - C. ☐ The last thing they ate.
  - D. ☐ Eating spicy food.
5. At a busy restaurant, a food worker is wearing single-use gloves while making hamburgers and sandwiches. They need to cook more hamburger patties. The worker reaches into the refrigerator, and using their gloved hand, they place 5 raw-beef patties onto the grill. Then, they must:
  - A. ☐ Wash their hands, gloves, and all, and then return to assembling sandwiches and hamburgers.
  - B. ☐ Place the buttered hamburger buns on the grill before washing their hands and then getting new gloves before returning to work assembling sandwiches and hamburgers.
  - C. ☐ Remove their gloves, wash their hands, and then put the gloves they were using back on before returning to work assembling sandwiches and hamburgers.
  - D. ☐ Remove and discard their gloves, wash their hands, and then put on new single-use gloves before returning to work assembling sandwiches and hamburgers.

6. How long should a person scrub their hands with warm soapy water while washing their hands?
- A. ☐ Quickly so the soap doesn't burn your skin.
  - B. ☐ It doesn't matter so long as you use soap.
  - C. ☐ Hands should be vigorously scrubbed for 15 to 20 seconds.
  - D. ☐ Hands should be gently massaged for 1 minute.
7. Handwashing is important for food safety because it:
- A. ☐ Keeps food smells from building up on your hands during your shift.
  - B. ☐ Prevents the spread of germs and cross-contamination.
  - C. ☐ Reassures customers so they feel good about the food you prepare.
  - D. ☐ Prevents food stains from getting on your cloths.
8. Which of the following situations require that you wash your hands?
- A. ☐ After handling raw meat before handling ready-to-eat foods.
  - B. ☐ After smoking, eating, drinking, and/or using the toilet.
  - C. ☐ After handling dirty dishes.
  - D. ☐ All the above answers are correct.
9. Identify the definition of "*Bulk-Cooling, potentially-hazardous-foods*":
- A. ☐ The process of cooling a large portion (*or multiple portions*) of 'potentially-hazardous-foods' from Hot ( $>135^{\circ}\text{F}$ ) to Cold ( $<41^{\circ}\text{F}$ ).
  - B. ☐ Rapidly cooling cooked 'potentially-hazardous-foods' within 2 hours from  $135^{\circ}\text{F}$  to  $70^{\circ}\text{F}$ , and within a total of 6 hours from  $135^{\circ}\text{F}$  to  $41^{\circ}\text{F}$  or less.
  - C. ☐ Properly cooling food within 4 hours to  $41^{\circ}\text{F}$  or less if prepared from 'potentially-hazardous-foods' ingredients at ambient temperature, such as reconstituted foods and/or canned tuna.
  - D. ☐ All the above answers are correct.
10. If you cut your finger:
- A. ☐ You are not allowed to work with food.
  - B. ☐ You need to wear a bandage for the rest of the day.
  - C. ☐ You may only use the hand that has not been cut.
  - D. ☐ You must wear a single-use glove in addition to a bandage over the injury.
11. Which is an example of cross-contamination?
- A. ☐ When gloved hands touch onions and then touch French fries.
  - B. ☐ When gloved hands touch lettuce and then touch cabbage.
  - C. ☐ When gloved hands touch raw hamburger and then touch the hamburger bun.
  - D. ☐ When gloved hands touch salami and then touch lettuce.
12. Define 'Danger-Zone':
- E. ☐ Between  $41^{\circ}\text{F}$  –  $135^{\circ}\text{F}$ , food does not taste good.
  - F. ☐ Below  $41^{\circ}\text{F}$  people can easily get hyperthermia.
  - G. ☐ Between  $41^{\circ}\text{F}$  –  $135^{\circ}\text{F}$ , bacteria will grow on/in 'potentially-hazardous-foods'.
  - H. ☐ Between  $71^{\circ}\text{F}$  –  $165^{\circ}\text{F}$ , bacteria will grow on/in 'potentially-hazardous-foods'.
13. Define 'Potentially-Hazardous-Foods':
- A. ☐ Contaminated food.
  - B. ☐ Foods that cause cross-contamination.
  - C. ☐ Hot coffee.
  - D. ☐ Foods that support the growth of bacteria when in the temperature 'danger-zone'.

14. Define 'Probe-Thermometer':
- A. ☐ A device used to tenderize meat.
  - B. ☐ A device used to measure air-temperature in a refrigerator.
  - C. ☐ A device used to measure the internal temperature of food.
  - D. ☐ A device used to measure the temperature of a flat grill top.
15. How do you calibrate a probe-thermometer?
- A. ☐ Insert the probe into ice-cream and adjust it so that it reads 22°F after it stabilizes.
  - B. ☐ Insert the probe into cold tap water and adjust it so that it reads 55°F after it stabilizes.
  - C. ☐ You can't calibrate probe-thermometers.
  - D. ☐ Insert the probe into an ice-water slurry and adjust it so that it reads 32°F after it stabilizes.
16. A large pot of cooked beans needs to be saved as leftover's for tomorrow. The food worker needs to:
- A. ☐ Leave the beans on the counter for 2 hours so that they don't heat up the refrigerator. Then, put the pot into the walk-in refrigerator to cool overnight.
  - B. ☐ Stir the beans in an ice bath. Use a thermometer to ensure that they cool to 70°F within 2 hours and then place the covered pot into the walk-in refrigerator.
  - C. ☐ Stir the beans in an ice bath. Use a thermometer to ensure that they cool to 70°F within 2 hours and then cool to 41°F within a total of 6 hours. Then place the beans inside a refrigerator in a covered container.
  - D. ☐ Put an ice-wand into the beans and then place the pot into the walk-in refrigerator.
17. To prevent food borne illness, raw chicken must be cooked to at least \_\_\_\_ to be safe to eat:
- A. ☐ 165°F
  - B. ☐ 155°F
  - C. ☐ 145°F
  - D. ☐ 135°F
18. A food worker needs to re-heat left-over chili so that it can be placed into the steamtable. To prevent foodborne illness, they must:
- A. ☐ Place the chili into a steamtable insert pan and then place it into the steam table early so that it reaches 165°F by lunch time.
  - B. ☐ Place the chili into the steamtable insert pan and slowly heat it so that it doesn't burn.
  - C. ☐ Rapidly heat the chili on the stove top so that it reaches 165°F within 2 hours before placing it into the steamtable.
  - D. ☐ Rapidly heat the chili on the stove-top so that it reaches 125°F within 4 hours before placing it into the steamtable.
19. After properly bulk-cooling left-over rice in the evening, a food worker date-labels the food. How long may cooked rice be kept at the restaurant before it must be served or discarded (*total days under refrigeration*)?
- A. ☐ 2 days
  - B. ☐ 4 days
  - C. ☐ 7 days
  - D. ☐ 10 days
20. You hear your co-worker say: "Only the supervisor is responsible to prevent foodborne illnesses." Is this:
- A. ☐ True
  - B. ☐ False

**You may use the following space to draw your mobile unit's floor plan:**

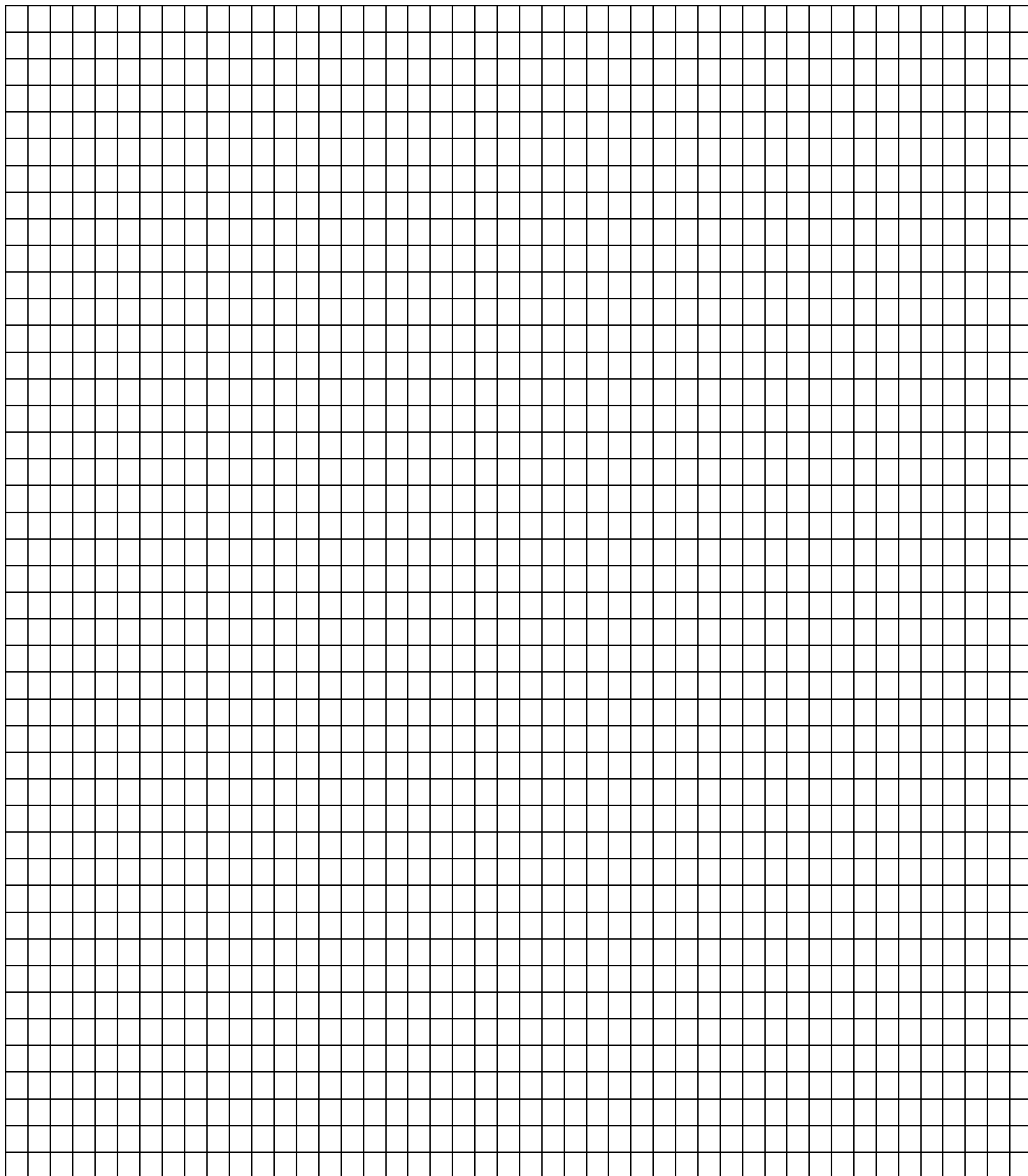
*(overhead drawing – looking down)*



*Consider submitting photos along with this drawing. You may e-mail photos directly to [ian.stromquist@hoodrivercounty.gov](mailto:ian.stromquist@hoodrivercounty.gov). Ensure that the subject line indicates that the photos are for your mobile food unit.*

## You may use the following space to draw the floor plan for your base-of-operations:

*This may include a commissary kitchen, warehouse and/or licensed restaurant facility. Use additional pages if necessary (overhead drawing – looking down)*



*Consider submitting photos along with this drawing. You may e-mail photos directly to [ian.stromquist@hoodrivercounty.gov](mailto:ian.stromquist@hoodrivercounty.gov). Ensure that the subject line indicates that the photos are for your mobile food unit.*



## Menu Worksheet:

What types of food do you intend to serve? How will you prepare them? Please provide a summary below.  
Use additional pages if necessary:

Menu Item / Food Type:	Quantity / Day	Preparation summary:
Example: Breakfast Bowls	20 per day	We assemble and pan fry the bowl ingredients to order. We will prep and keep all the ingredients in advance; they will be kept either hot or cold. We will offer the following hot ingredients: diced potatoes, scrambled eggs, olives, cheese, garlic, kale, spinach, ham, bell peppers; we will offer the following cold ingredients/garnishes: sour cream, tomatoes, salt/pepper, yogurt.
Example: Burritos	50 per day	We make the burritos to order. We will prepare 3 types of meat in advance. Our burritos will contain an assortment of lettuce, cheese, rice, beans, cilantro, sour cream, and choice of meat.

## Food Preparation Plan & Safety Narrative:

*In the space provided below, write down your plan. Please include your procedures for maintaining proper food temperatures during operations and any other significant plan element. This may include methods for hot-holding, cold-holding, bulk-food cooling, bulk-food reheating, time-control protocols. It is also helpful for us to understand if foods will be made from scratch or bought from the store 'ready-to-eat'. Include additional pages if necessary.*

## Starter Questions: *Operational Logistics*

Days and Hours of Operation: [\_\_\_\_\_]

Expected meals served per day: [\_\_\_\_\_]

Number of staff (total): [\_\_\_\_\_]

Do you intend to provide seating for your customers? Yes ☐ No ☐

### Mobile Unit Operating Schedule:

☐ I plan on operating at one location. Location address: \_\_\_\_\_

☐ I plan on operating at multiple locations or on a route.

*List all locations where you plan to operate. If operating on a fixed route or in multiple locations, indicate the approximate time and days of the week or date you will be at each location. Attach additional sheets if necessary.*

Operating Location	Time	Day of Week or Specific Date

*Often, multiple types of permissions are required before operating at a location. These may include: permission from the land-owner, permission from the local planning department, permission from City (transient merchant permit), permission from the port authority, etc. Every location is different. Ensure you have permission before you move forward with your business plans. These permissions are not granted by Hood River County Health Department. It is your responsibility to ensure permission to operate at a location.*

## Utilities & Connections

*Without safe supplies of potable water, electricity, and/or petroleum gas, mobile food units need to cease operations immediately because they will not be able to maintain safe food temperatures or wash their hands. Also, Oregon Food Code rules limit ways that mobile units can operate by requiring that they always remain mobile. Accessory tanks on the ground are usually prohibited, and all operations and equipment must be integral to the mobile unit (onboard the vehicle – off the ground).*

We will typically get our freshwater from (address, method): \_\_\_\_\_

The water comes from this public water system:

☐ Crystal Springs, ☐ Ice Fountain, ☐ Cascade Locks, ☐  
Parkdale, ☐ Hood River, ☐ Other: \_\_\_\_\_

We will dispose wastewater from our onboard tanks at (address, method): \_\_\_\_\_

The wastewater will drain into a:

☐ Onsite Septic System, ☐ Public Sewer,  
☐ Other: \_\_\_\_\_

*The most common location to dispose of wastewater from a mobile food unit locally is at the City of Hood River Wastewater Treatment Plant, Recreational Vehicle (RV) dump-station. It is located at: 818 Riverside Dr., Hood River; the entrance to the dump station is off North 8th Street. Due to higher concentrations of fats, grease, and oils, typical to mobile food unit wastewater, please contact the City of Hood River Public Works department to arrange for permission/permits to dispose of mobile unit wastewater prior to utilizing this service.*

Will you utilize petroleum gas on the mobile food unit (propane)? Yes ☐, No ☐.

If 'yes', what volume is the propane tank? [\_\_\_\_\_]

Is the propane tank is attached to the Mobile Unit: Yes ☐, No ☐.

Will the Mobile Unit use electricity? Yes ☐ No ☐ How many amps does the electrical connection require? [\_\_\_\_\_]amps

Will the Mobile Unit utilize a generator? Yes ☐ No ☐ How many amps/watts does the generator provide?  
[\_\_\_\_\_]amps / [\_\_\_\_\_]watts

*While some mobile units may have access to full utility connections at their chosen operating location, during this plan review process, we only consider the capacity of the integral onboard utilities, (fresh & wastewater tanks, and propane tanks). Onboard electrical generation is optional; however, ensuring temperature control is maintained during transportation is essential; a truly mobile operation will need to have onboard electrical generation, and/or battery back-up, if electric appliances are needed to maintain temperature control.*

## Base of Operations (Use Additional Pages Where Necessary)

Will the mobile food unit use a base-of-operations (*commissary kitchen, warehouse and/or licensed restaurant facility*)? Yes ☐ , No ☐ & 'Request' form is attached

If 'yes', please describe these facilities on additional pages. Submit full operational plans for any other facilities used.

If 'no', complete the Special Request Form For: Operating without a 'Base-of-Operations' form on the following page.

**Commissary Kitchen / Restaurant Information:** Floor Plan Drawing Attached: Yes ☐ No ☐; N/A ☐

Besides the mobile food unit, I will prepare food and supplies at the following commissary-kitchen/restaurant facility(s) (*include addresses, etc.*):

The following menu item(s)/ingredient(s) & supplies will be prepared/managed/stored in the commissary-kitchen/restaurant:

We will have access to the commissary facility anytime ☐. Or the commissary facility will only be available for us to use during the following days/times:

Describe the activities and preparation methods that will be used at the commissary-kitchen/restaurant. Please describe **all** activities and food preparation methods used (*these may include bulk cooking, cooling, portioning, produce washing, warewashing, catering, etc.*). You may also use page 6 of this document and/or attach additional pages. Additional pages attached: Yes ☐ No ☐.

**Warehouse Information:** Floor Plan Drawing Attached: Yes ☐ No ☐; N/A ☐

Besides the mobile food unit, I will store food and supplies at the following warehouse facility(s) (*include addresses, a description of the facility, etc.*):

What food and equipment are you planning to store in your warehouse?

We will have access to the warehouse facility anytime ☐. Or the warehouse facility will only be available for us to use during the following days/times:

The warehouse facility will protect food and supplies from hazards like pest infestations, weather, etc. by (§ 6-202.13 & § 6-202.15):

A more comprehensive warehouse plan review packet is available online: <https://www.hoodrivercounty.gov/mu>

Is this document is attached: Yes ☐ No ☐.

**\*Optional\* Special Request Form For: *Operating without a 'Base-of-Operations'*** N/A ☐

(OAR: [333-162-0040\(3\)](#))

How will you maintain proper hot and cold food temperatures during storage and/or transit?

How will you provide adequate facilities for cooling and reheating of foods?

How will you provide adequate utensil and warewashing facilities onboard the unit?

How will you assure proper cleaning and sanitizing of the unit? Where? Wet-mopping?

Where will you obtain food and water supplies? How will they be transported? How often?

How will you store and dispose of garbage generated by the mobile food unit and customers?

Will you have a catering operation (*food prepared onboard, then delivered and/or served at another location*)?

What supplies and/or food will be prepared and/or stored at home?

*The ability to operate without a base of operation shall be determined by Hood River County Health Department. Any regulatory determination is made in accordance with OAR: 333-150-0000 § 8-303.10 & 8-303.30 and 333-162-0040(3). If you wish to contest this regulatory determination, you may request a hearing within 90 days by contacting our office (541-387-6885). All hearings will be conducted in accordance with ORS: 183.*

## Food Safety Questionnaire:

*Answer these questions using to your own knowledge and your proposed operational plans. In many ways, there are no wrong answers here. Please tell us what you think the right answer is. We will help you understand the safest way for you to operate your food establishment and the requirements of the Oregon Food Code. Use additional pages if you need to provide additional details. If you need help because English is a second language, please contact our office to discuss options. Thank you. A good source for more food safety information is the Federal Model Food Code: <https://www.fda.gov/media/110822/download>*

**Active Managerial Control:** More INFO at: [FDA Model Food Code - Annex 3](#), page 405 of 767,  
And [FDA Model Food Code - Annex 4](#), pages 605-644 of 767.

Please explain how you plan to ensure that the person(s) physically present and left in charge of the mobile food unit (during any given shift) will be able to 'Demonstrate Knowledge' as required under § 2-102.11 and control risk factors in the mobile food unit as required under § 2-103.11.

If employees will be left to operate the food establishment alone (*without the owner/licensee present*), please describe any procedures and/or methods used to ensure that standards are always met: N/A ☐

**Controlling Communicable Diseases:** More INFO at: [FDA Model Food Code - Annex 3](#), page 408 of 767.

Please generally describe your policies and procedures concerning the restriction and exclusion of ill food employees. What are two key concerns? (Subpart 2-201)

- a.
- b.

**Personal Hygiene Practices:** More INFO at: [FDA Model Food Code - Annex 3](#), page 447 of 767.

Please describe three examples (*unique to your mobile food unit*) of how you plan to prevent contamination of food, from your food workers' hands (Subpart 2-301):

- a.
- b.
- c.

Please describe another example of a good general hygienic practice that you will use to prevent contamination of food in your mobile food unit (Subparts 2-302 – 2-304):

**Controlling Cross-Contamination:** More INFO at: [FDA Model Food Code - Annex 3](#), page 477 of 767.

Please describe two examples (*unique to your mobile food unit*) that will ensure that cross-contamination is prevented in your mobile food unit (§ 3-302.11, § 3-306.14 and Parts 4-6, 4-7):

a.

b.

Mobile food units use several different types of chemicals. These may include cleaners, pesticides, lubricants, etc. Using two examples, how will you keep chemical away from food (Chapter 7):

a.

b.

How will you store raw animal food to prevent contamination of ready-to-eat food (§ 3-302.11)? ☐ N/A

How & where do you intend to clean & sanitize dishes, utensils and other '*food-contact-surfaces*'? (Chapter 4 of Food Code)

If there are items that are too large to fit into the 3-basin sink and/or the mechanical dishwasher, how will you clean and sanitize them? These processes are sometimes called: '*clean-in-place*'. ☐ N/A

**Food Sources:** More INFO at: [FDA Model Food Code - Annex 3](#), page 458 of 767.

Please describe where you intend to acquire the food ingredients (§ 3-201.11):

Please describe any off-mobile-unit locations used to prepare food (§ 3-201.11):

**Time/Temperature Control:** More INFO at: [FDA Model Food Code - Annex 3](#), (mostly) pages 488-523 of 767.

**Important Food Code Definitions:**

**'Bulk-Cooling'** means: the process of cooling a large portion, or multiple portions of food (Hot → Cold). This includes cooling items that had been held on hot-holding units, and/or cooling portions of cooked animal and vegetable products.

**'Potentially-Hazardous-Foods'** means: foods that will support bacterial growth when held at temperatures in the danger zone (41°F ↔ 135°F).

- Germs grow easily in foods like meat, fish, poultry, milk, re-fried beans, cooked rice, baked potatoes and cooked vegetables. These are called potentially hazardous foods. These are all foods that are moist and they have nutrients that the germs need to grow. Germs grow well on these foods at warm temperatures between 41°F and 135°F.

The Oregon Food Code requires that you use a probe thermometer to measure the internal temperatures of '*potentially-hazardous-foods*'. Why do you think that this is important?

Please describe two examples where using a probe thermometer is important in your facility:

i.

ii.

***Cold-Holding:***

Refrigerated food must be maintained at 41°F or colder as per § 3-501.16. How did you determine the amount of cold storage/holding that you will need for your operation (§ 4-301.11)?

Describe your procedure for date marking of ready-to-eat, potentially hazardous food items? (§ 3-501.17)

How and where will frozen food be thawed? (§ 3-501.13, § 3-302.11) ☐ N/A

***Cooking Raw Animal Products:***

Will your operation be cooking raw animal products onboard the mobile food unit? Yes ☐, No ☐

If 'yes', what? How?

- a) If 'yes', describe how the food worker will know when raw animal products are fully cooked:

***Hot-Holding:***

What type of equipment will you use to keep hot food hot? How will you ensure that food is at the required temperature throughout the day?

***Bulk-Cooling:***

Will your operation be cooling bulk quantities of 'potentially hazardous food(s)'? Yes ☐, No ☐

Why is rapid cooling of potentially hazardous foods important?

- a) If 'yes', how will food handlers know that the food has cooled from 135°F to 70°F within two hours and then from 70°F to 41°F within 4 hours?

***Reheating for Hot-Holding:***

Will your operation be re-heating cooled potentially-hazardous-foods for hot-holding? Yes ☐, No ☐

If 'yes', what? How?

- a) If 'yes', describe how the food worker will know when re-heating is finished, and the product may be placed into long-term hot-holding:
- b) If 'yes', list the types of equipment used for reheating potentially hazardous food:



**Other Best Practices:** We are happy to provide technical assistance upon request (541-387-6885).

**Consumer Advisory:**

Will your operation serve foods from animals raw or partially cooked? This may include items such as: eggs over-easy, rare steaks, rare-beef burger patties, sushi, steak tartar, raw oyster shooters, seared tuna, ceviche, etc. (§ 3-603.11): Yes ☐, No ☐ – If no, skip this section

If 'yes', list all menu items that may include (in their finished form) any raw, partially cooked, or acid cooked raw animal products.

If 'yes', describe how you will comply with § 3-603.11 by providing both a 'Disclosure' and a 'Reminder' to your consumers.

**Parasite Destruction:**

If serving raw fish (such as: sushi, ceviche, poke, etc.), will parasite destruction be done on-site or by the supplier? (§ 3-402.11 & § 3-402.12)? ☐ N/A

☐ **On-site:** Provide your procedure on parasite destruction on additional pages as per § 3-402.11(A).

☐ **Supplier:** As required under § 3-402.12(B), provide the name of your supplier and a copy of the written agreement/statement stipulating that the fish supplied are frozen to a temperature and for a time specified under § 3-402.11(A).

**Special Processes:**

Will your operation be (§ 3-502.11) (check all that apply): ☐ N/A

- ☐ Smoking food as a method of food preservation rather than as a method of flavor enhancement;
- ☐ Curing food;
- ☐ Using food additives or adding components such as vinegar as a method of food preservation rather than as a method of flavor enhancement or to render a food so that it is not potentially hazardous;
- ☐ Packaging food using a reduced oxygen packaging method.

If you checked any of the above boxes, describe your proposed food processes below:

### Optional Bulk-Food Cooling Plan:

If you wish to bulk-cool potentially hazardous foods at your food establishment, you must submit a bulk-cooling plan – No Exceptions! Attach additional pages if necessary.

*The ability to perform bulk-food-cooling without a base of operation shall be determined by Hood River County Health Department. Any regulatory determination is made in accordance with OAR: 333-150-0000 § 3-501.15, § 8-303.10, § 8-303.30 and 333-162-0040(3). If you wish to contest this regulatory determination, you may request a hearing within 90 days by contacting our office (541-387-6885). All hearings will be conducted in accordance with ORS: 183.*

Will your operation be cooling bulk quantities of potentially-hazardous-food(s) onboard the mobile food unit?

*This may include foods prepared one day, cooled, and served later. It may also include foods held-hot on a steam table that are cooled and saved for another meal service. (§ 3-501.14, § 3-501.15)*

Yes ☐, No ☐; If 'yes', is the bulk-cooling plan attached to this application Yes ☐, No ☐

### Mobile Unit Operational Logistics Questions:

Describe how food will be transported to and from the unit. Also, describe how hot and/or cold holding temperatures will be maintained during transit (§ 3-501.16).

Describe the type of overhead protection provided for your unit such as: ceilings, awnings, umbrellas, etc. (OAR: 333-162-0680).

Describe how garbage will be stored and where it will be thrown away.

What methods of insect and rodent control will be used in your unit? (§ 6-202.15, § 6-501.111 & § 6-501.112)?

Where is your worker/employee toilet facility located (§ 6-302, § 6-402.11(E) & OAR 333-162-0020(4))?  
Provide details for all your proposed routes and/or locations:

## Mobile Food Unit Cleaning Plan:

How do you plan to clean the 'non-food-contact' surfaces (*floors, walls, & ceiling*) of the mobile food unit?

## Please Include Any Additional Information Here:

Are there any special components, operational considerations, or special menu items planned for your mobile food unit that were not already addressed in these questions? If 'yes', please explain below (*please attach additional pages if necessary*).

## Common Onboard Equipment and Finished Surfaces: *Mobile Food Unit*

This section is for us to better understand what equipment will be onboard your mobile food unit. Other equipment used, at the commissary kitchen for example, should be listed separately.

### Interior Finishes/Surfaces:

	Floors	Cove Base	Walls	Ceilings	Shelving
What are surfaces like in the food preparation areas onboard the mobile food unit?					

For Example:

<u>All</u> food preparation areas	Stainless Steel	Rubber	Stainless steel Painted smooth	Removable Awning	Wood, Painted smooth
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## Temperature Control Equipment Lists:

Refrigerator for your mobile food unit (§ 4-301.11):

Refrigerator Number/Name	Size / Volume	Manufacturer / Model	Type of food stored inside

Hot-holding units for your mobile food unit (§ 4-301.11):

Unit- Number/Name	Size / Volume	Manufacturer / Model	Type of food stored inside

Note: Add pages as needed

Other Equipment:

**Ice:** Will you use ice onboard the mobile food unit? Yes ☐, No ☐

a) Is ice purchased? Yes ☐ No ☐; if 'yes', who is your supplier?

b) Will you have an ice-machine onboard the mobile food unit? Yes ☐ No ☐

➤ If 'Yes':

Complete adjacent table →

c) If used, what will ice be used for onboard the mobile food unit?

**Ice Machine Specifications:**

For ice-machines installed onboard mobile food units

Make and model of ice-machine:

Maximum volume of ice produced per day: lbs.

Maximum volume of ice stored in ice-bin: lbs.

How will you drain the installed ice-machine?

Whether you intend to buy ice or make it yourself onboard the mobile food unit, how much ice will melt and then be added to your total wastewater generation (versus being served as food – beverage ice for example)?

[\_\_\_\_] gallons ☐ N/A

Do you plan to utilize an off-unit barbeque (or other outdoor cooking unit)? Yes ☐, No ☐

If 'yes', what type(s):

If 'yes', how will handwashing be provided at the outdoor cooking unit?

List any other special food preparation equipment used onboard: These items may include special food containers, food processing equipment, juicers, special cooking equipment, vacuum-sealers, etc.

## Mobile Food Unit, Water System & Plumbing Components:

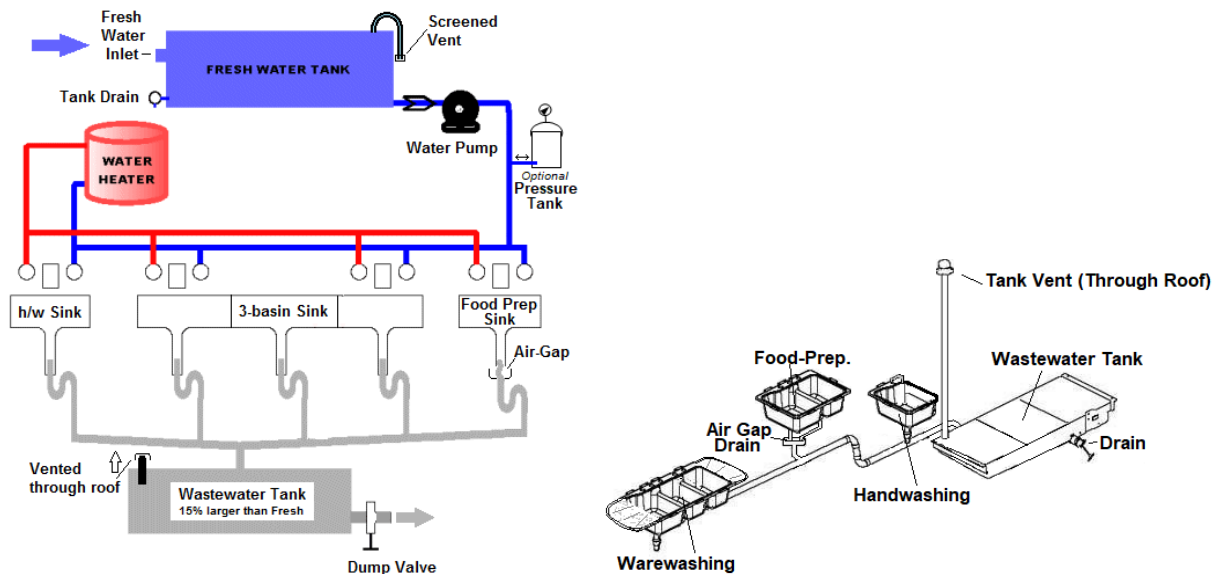
The onboard fresh and wastewater system will need to be designed in compliance with parts 5-1, 5-2, 5-3 & 5-4 of the Oregon Food Code. Particularly, we **strongly** recommend that you read Part 5-3 & § 5-401.11(A) of the code very carefully before designing and building your mobile food unit. If you require technical assistance, contact our office.

Have you reviewed the Oregon Food Code rules listed under Part 5-3 & 5-4? Yes ☐, No ☐

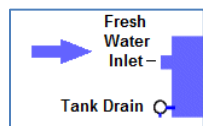
Direct Link: <https://www.oregon.gov/oha/PH/HEALTHYENVIRONMENTS/FOODSAFETY/Documents/foodsafetyrulesweb.pdf#page=68>

Will a licensed plumber, or other expert review the plumbing installation? Yes ☐, No ☐; Who? \_\_\_\_\_

### Example Onboard Water System Designs:

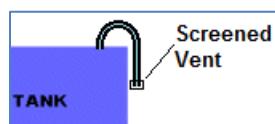


### Freshwater System Inlet:



Describe your proposed water system inlet(s). Explain how you will comply with Oregon Food Code Rules: 5-302.11, 5-302.13, 5-302.15, 5-303.12, 5-303.13, and 5-304.13. Please include product-models, pictures, and/or sketches with your plan submission if you can.

### Freshwater Tank Vent:



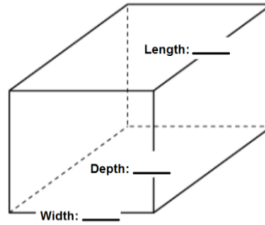
Describe your proposed freshwater tank venting system. Explain how you will comply with Oregon Food Code Rule: 5-302.14. Please include pictures, and/or sketches with your plan submission if you can.

## Onboard Sinks Worksheet: *(Ensure that all sinks are also labeled on your floor plan drawing)*

How many sinks are onboard the mobile food unit? [ ] Please provide the dimensions of each sink that will be installed onboard.

Do you have any of these types of sinks? Yes ☐, No ☐. Are they labeled on your floorplan drawing? Yes ☐, No ☐

☐ Handwashing  
sink(s):

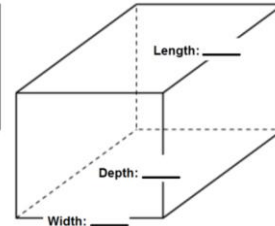
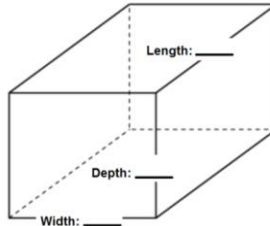
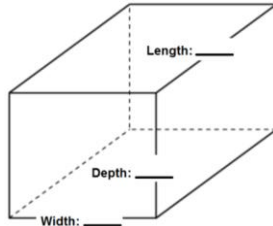


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Depth = [ ] in.

Width = [ ] in.

☐ Warewashing  
Sink  
(3-basin sink)



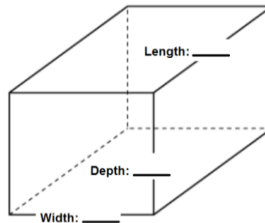
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Are drainboards provided for warewashing? Are they shown on the floor plan drawing? Yes ☐, No ☐

☐ Indirectly  
Drained Produce  
Washing / Food  
Preparation Sink:

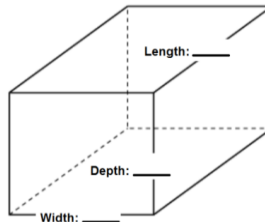


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☐ Mop sink:



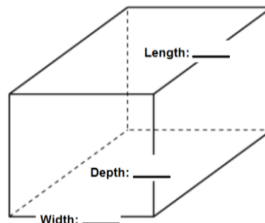
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☐ Other Sink(s):

*What is the purpose  
of this sink?*



Length = [ ] in.

Depth = [ ] in.

Width = [ ] in.

Please include any additional information we should consider below:

## How do you use water onboard the mobile food unit?

### When Water is used as an Ingredient in Food Preparation:

List foods/meals/food-processes that you intend to prepare onboard the mobile food unit that will require water as an ingredient. This shall include food preparation where water is used during the cooking process (like stir-frying vegetables).

Item (Use additional pages if necessary) List all foods you intend to prepare.	Estimated volume of water per meal/batch prepared	Estimated number of meals/batches (of this food type) prepared per day.
	<input type="checkbox"/> Batch / <input type="checkbox"/> Meal	<input type="checkbox"/> Batch / <input type="checkbox"/> Meal
	<input type="checkbox"/> Batch / <input type="checkbox"/> Meal	<input type="checkbox"/> Batch / <input type="checkbox"/> Meal
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	<input type="checkbox"/> Batch / <input type="checkbox"/> Meal	<input type="checkbox"/> Batch / <input type="checkbox"/> Meal
<i>Example:</i>		
Cooked Rice	<input checked="" type="checkbox"/> Batch / <input type="checkbox"/> Meal 12 cups per batch	<input checked="" type="checkbox"/> Batch / <input type="checkbox"/> Meal 3 batches per day
Stir-Fried Vegetables	<input type="checkbox"/> Batch / <input checked="" type="checkbox"/> Meal 3 ounces per meal	<input type="checkbox"/> Batch / <input checked="" type="checkbox"/> Meal 20 orders per day
Boiling a whole chicken for burrito meat	<input checked="" type="checkbox"/> Batch / <input type="checkbox"/> Meal 1 gallon per batch	<input checked="" type="checkbox"/> Batch / <input type="checkbox"/> Meal 3 batches per day

Will you wash/rinse fresh produce (fruits & vegetables) onboard the mobile food unit? (§ 3-302.15)

Yes ☐, No ☐ - If 'yes', Where? How?

If 'yes', Where? How?

If 'yes', also complete the table below:

### Water is used to clean fresh produce (fruits and vegetables). How much will you use?

Item (Use additional pages if necessary) List all produce you intend to wash.	Estimated volume of water per item washed	Estimated number of items washed per day.
<i>Example:</i>		
Tomatoes	Submerged in a sink with produce washing chemical, about 3 gallons to fill the sink basin.	We anticipate changing the water 3-4 times per day.
Lettuce	We will rinse the lettuce; about ½ gallon per head of lettuce.	We anticipate using 5 heads of lettuce per day.

### Additional Water System Questions:

Do you anticipate that your type of food service operation will consume more than 5 gallons of water for handwashing during a typical food service? (§ 5-203.11, § 5-305.11 & § 6-301) Yes ☐ No ☐

If 'yes', how much? [\_\_\_\_\_] gallons

Describe the handwashing system that will be used on the unit (§ 5-203.11 & § 6-301)?

Where and how will the mobile food unit be cleaned? If you plan to wet mop the mobile food unit, where will you dispose of mop water (§ 5-203.13(B) & OAR 333-162-0930)?

How is hot water provided onboard the mobile food unit?

What is the capacity/volume of the hot water heater? [\_\_\_\_\_] gallons

Will the water system be under pressure? How will you accomplish this?

### Onboard Water Holding Tanks:

*The entire water system must be integral to the mobile food unit. Integral means that all equipment associated with a mobile unit must be rigidly and physically attached to the unit without restricting the mobility of the unit while in transit.*

#### Potable Water (Fresh Water):

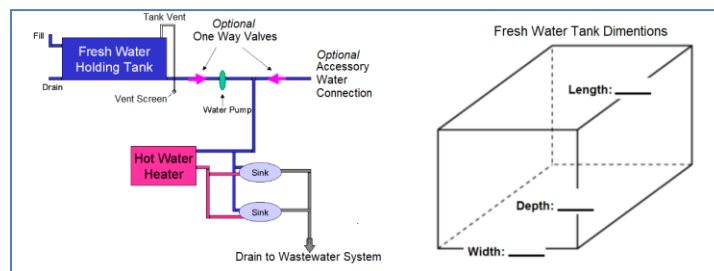
What is the total holding capacity of the freshwater tank(s)? [\_\_\_\_\_] gallons

How will the freshwater tank be accessible and translucent so that the cleanliness can be determined through a visual inspection? Do you need technical assistance regarding proper cleaning and sanitizing steps for the onboard freshwater system (§ 5-304.15)? Yes ☐ No ☐

How is water moved/pumped from the freshwater tank to each faucet?

What are the dimensions of the onboard freshwater holding tank(s)?

Length = [\_\_\_\_\_] inches; Depth = [\_\_\_\_\_] inches; Width = [\_\_\_\_\_] inches.



Example Freshwater Tank System



## Wastewater:

What is the total holding capacity of the onboard wastewater tank(s)? [\_\_\_\_\_] gallons

How do you intend to vent the onboard wastewater tank?

What are the dimensions of the onboard wastewater holding tank(s)?

Length = [\_\_\_\_\_] inches; Depth = [\_\_\_\_\_] inches; Width = [\_\_\_\_\_] inches.

How do you plan to remove wastewater from the onboard wastewater tank?

Who will physically remove the wastewater from the holding tank?

Where will the wastewater from the holding tank be dumped?

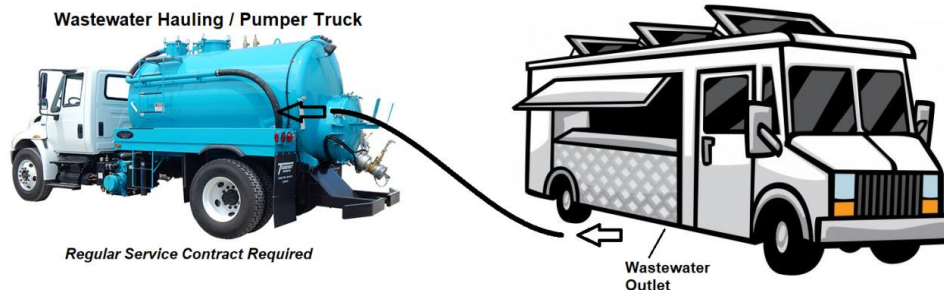
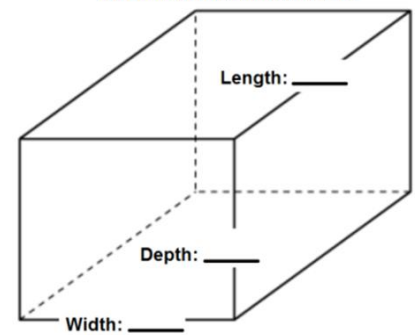
How do you intend to ensure that wastewater (of any kind) will not fall on the ground during operation and during transport?

Do you have a service contract for regularly emptying the wastewater Holding Tank? Yes ☐, No ☐

If 'no', explain:

If you intend to empty the wastewater holding tank into an existing sewer system, which sewer system?  
Which Dump Station/Location? How often do you expect to do this?

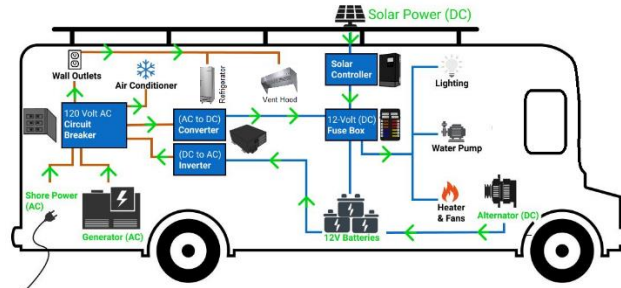
Wastewater Tank Dimensions



## Onboard Electrical System:

The onboard electrical system shall be both functional and safe. There are no regulatory building Codes for mobile food establishments; however, we strongly recommend that mobile units meet the minimum design and safety requirements of the current [Oregon Electrical Specialty Code](#) (OESC). If we observe problems or have other concerns regarding the safety and functionality, we will direct you to acquire written verification from a licensed electrician and/or the Hood River County Building Code authority that the mobile unit is safety and functional. For technical assistance, please contact Hood River County Building Code authority (541-386-1306).

Will a licensed electrician, or other expert, review the electrical installation? Yes ☐, No ☐; Who? \_\_\_\_\_



## Oregon Food Code (Food Sanitation Rules, OAR 333-150, OAR: 333-162):

1. Do you have a printed or digital copy of the Food Code and Mobile Unit Code? Yes ☐, No ☐

Remember, the Oregon Food Code may be found online at:

<https://www.oregon.gov/oha/PH/HEALTHYENVIRONMENTS/FOODSAFETY/Documents/foodsantiationrulesweb.pdf>

2. Do you know how to locate specific information in the rules?  
Yes ☐, No ☐ – if 'no', contact our office for assistance (541-387-6885)

## Legal agreement:

I, \_\_\_\_\_, hereby certify that the above information is correct and I fully understand that any deviation from the above without prior permission from this Hood River County Health Department, Environmental Health Office may nullify final approval.

Signature(s) of Owner(s) or responsible representative(s):

\_\_\_\_\_  
Check for digital signature only: ☐ Date: \_\_\_\_\_

\_\_\_\_\_  
Check for digital signature only: ☐ Date: \_\_\_\_\_

\_\_\_\_\_  
Check for digital signature only: ☐ Date: \_\_\_\_\_

Approval of these plans and specifications by the Regulatory Authority does not indicate compliance with any other code, law or regulation that may be required – federal, state, or local. It further does not constitute endorsement or acceptance of the completed establishment (structure or equipment). A pre-opening inspection of the establishment with equipment in place and operational will be necessary to determine if it complies with the Oregon Food Code (OAR: 333-150).

If you need this information in an alternate format, please call  
541-387-6885

Thank you for completing this application. Please remember to include the appropriate fee with this document and include any attachments necessary to complete your plan. Any missing items will delay review/approval of your submission. Our fee schedule is available at the following link: <https://www.hoodrivercounty.gov/fpl>. Then click → [Oregon Health Authority Licensing Program Fee Schedule](#).

**Please Note:** We will respond to your application with a written letter. While we are happy to answer your questions on the phone, all our final regulatory determinations will always be in writing. It is very important to read all our correspondence and ask questions if you are unsure.

Thank you.